

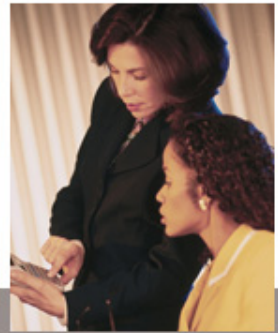
SUMMARY AND RECOMMENDATIONS



NATIONAL ASSOCIATION OF

Community Health Centers

NACHC WINTER STRATEGY MEETING
January 25-27, 2018
Delray Beach Marriott – Delray Beach, FL



America's Voice for Community Health Care



SETTING THE STAGE

MEETING OBJECTIVES

- **Reiterate the real challenges facing the Health Center Movement**
- **Understand what we can anticipate happening in the next 12-18 months**
- **Recommend specific actions to preserve and expand the Health Center Movement**



SETTING THE STAGE

KEY POINTS FROM PRIOR MEETINGS/COMMUNICATIONS

- **When we act as one we can accomplish amazing things**
- **A portfolio of resources (grants, Medicaid, 340B, FTCA, NHSC, etc.) support health centers – all are needed**
- **Change is coming – be prepared!!**

Leading through epochal change



We grow so we can solve problems.

We face problems so we can grow.



SETTING THE STAGE

LEGISLATIVE & ADMINISTRATIVE PRIORITIES – WHAT CAN WE EXPECT

- **Fix funding cliff** – already seeing collateral damage from prolonging resolution
- **Medicaid** – while legislative action is unlikely, CMS (through regulatory and administrative changes) will push for increased state flexibility; increased vigilance to monitor whether changes comply with existing law/regulations
- **340B** – avoid health centers becoming collateral damage in the fight between Big Pharma and Hospitals; monitor state efforts to reduce legitimate payments



SETTING THE STAGE

HOW TO PRESERVE AND STRENGTHEN THE HEALTH CENTER MOVEMENT

- **Need powerful coalitions – must build new/expanded ones**
- **Need to retain a central focus/purpose**
- **Individuals cannot become more important than the whole**
- **Access to sufficient resources**



SETTING THE STAGE

TRENDS LIKELY TO IMPACT HEALTH CENTERS

- **Focus on SDH – balance between purpose and profit**
- **Investors looking for technology enabled scale**
- **Allow states and markets to “work it out”, aka less control**
- **Transition from private to government payment for services**
- **Need to recognize and understand the competition**



SETTING THE STAGE

**WHAT NACHC CAN DO TO STRENGTHEN ITS VOICE
AND ENHANCE ITS IMPACT IN THE POLICY,
INDUSTRY, AND PUBLIC ARENAS**

- **Build new/expanded partnerships/coalitions**
- **Build a brand**
- **Be seen as part of solutions**



PARTICIPANT RESPONSE TO THE CURRENT HEALTH CARE ENVIRONMENT

What will your health center be forced to do if federal grant funding is not fully restored by February 8th?

- Planning site closures/curtailing services
- Hiring freezes and layoffs
- Information and message that reassure rather than “scare” staff



PARTICIPANT RESPONSE TO THE CURRENT HEALTH CARE ENVIRONMENT

What policy challenges are limiting health centers ability to leverage areas of competitive advantage?

- Patient attribution
- Telehealth reimbursement
- Same-day billing, e.g., behavioral health
- UDS reporting

How can health centers drive innovation in the Medicaid program?

- Social Determinants of Health (SDH) – note; should we call it “Drivers”?
- Use our data to demonstrate value, tell our stories and show how Medicaid dollars are saved

PARTICIPANT RESPONSE TO THE CURRENT HEALTH CARE ENVIRONMENT

How do we tackle high risk CHCs?

- Data transparency and information sharing to determine who is in trouble
- Increase board awareness
- Dashboards with metrics that allow transparency among peers

How can health centers garner additional political and policy support at the state level?

- National “brand”
- Medicaid: understand state strategic priorities, be solution-focused, understand pressure points and show how dollars are saved
- Expand contacts with local and state elected officials
- Find new 1115 waiver advocacy partners



PRIORITY FOCUS AREAS

FOCUS AREA 1:

The Future of Health Care

FOCUS AREA 2:

Building Strategic Capacity

FOCUS AREA 3:

Messaging and Visibility



**Focus Area #1 CHARGE:
THE FUTURE OF HEALTH CARE**

Develop an understanding of what health care may look like in the immediate future; examine how the likely scenarios may impact health centers.



**Focus Area #1:
The Future of Health Care**

THREE SCENARIOS

- 1. Whiplash**
- 2. Divestment**
- 3. Systems Change**



Focus Area #1: The Future of Health Care

#1 – WHIPLASH, aka “uncertainty”

- **Constantly changing funding models and policy priorities**
- **2021 Democratic-led reform undermined by GOP in 2025**
- **CHC leaders devote countless hours to advocacy, achieving only short-term results**
- **Competing values: "health equity" vs. "winner take all"**
- **CHC leaders struggle to maintain basic systems amidst uncertainty**



Focus Area #1: The Future of Health Care

#2 – DIVESTMENT, aka “scarcity”

- Country’s attention consumed by immigration, foreign policy crises, and extreme weather events
- Legislative inaction on social “safety net,” despite advocacy and bipartisan support
- A return to “pull yourself up by your bootstraps” mythology
- Prevailing value: “Some people matter, some people don't”
- CHC leaders struggle to survive and adapt to scarcity



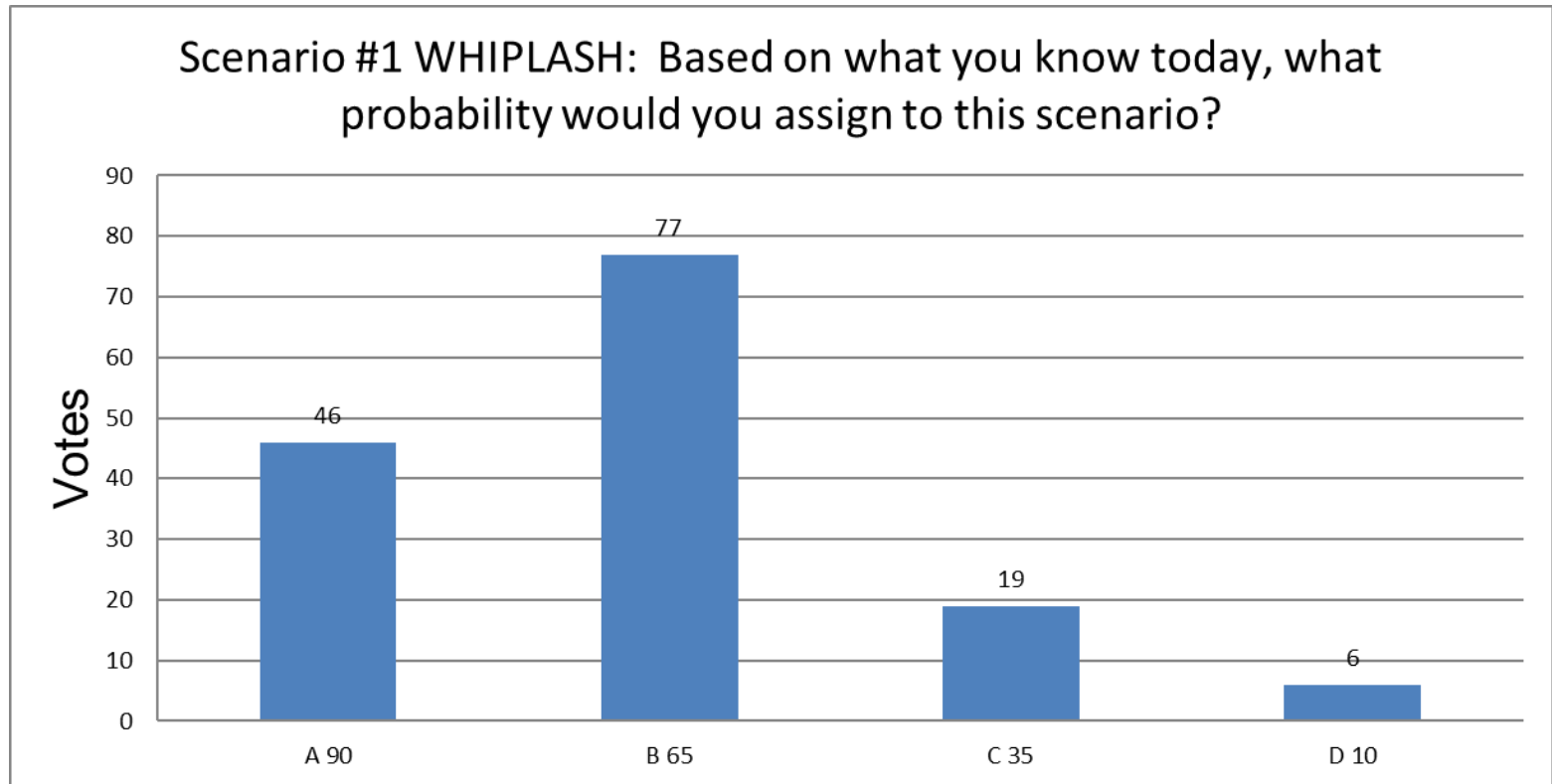
Focus Area #1: The Future of Health Care

#3 – SYSTEMS CHANGE, aka “emerging demand”

- **“Grand coalition” achieves basic health services for all, free of charge**
- **Private health insurance survives; “Medicare for all” efforts lose steam**
- **CHCs lose privileged position as “safety net” providers, and must compete on equal footing**
- **Prevailing value: “good health makes good sense”**
- **CHC leaders struggle to compete on value and to adapt to more complex emerging demand**

Focus Area #1: The Future of Health Care

DISCUSSION OUTCOME



Majority of participants identified the Whiplash Scenario as the one with the highest probability – 83%



Focus Area #1: The Future of Health Care

TAKE AWAY MESSAGES FROM THE “SPARK” PRESENTERS

- **Regardless of how the future unfolds, health center ability to survive and thrive requires the following:**
 - **Health centers are OF and FOR their communities**
 - **There are real and significant differences between the rural and urban communities health centers serve – strategies must be tailored to the community**



Focus Area #1: The Future of Health Care

TAKE AWAY MESSAGES FROM THE “SPARK” PRESENTERS

- Increase commitment to growing capacity, knowledge, and involvement of health center board members, including board members being the messengers**
- Leadership requires creative courage**
- Continually reassess and reexamine your partnerships**



Focus Area #1: The Future of Health Care

SUMMARY OF AREAS WHERE STRATEGIES WILL BE NEEDED

- **Target high quality employees**
- **Engage millennials to become next generation of health center leaders**
- **Expanded partnerships: business, investors, insurers, large technology firms**



Focus Area #1: The Future of Health Care

SUMMARY OF AREAS WHERE STRATEGIES WILL BE NEEDED

- **Bi-partisan advocacy**
- **Maximize communication and branding**
- **Data driven strategy: sharpen the value message to demonstrate impact for businesses, investors, cost savings**



Focus Area #2 CHARGE: BUILDING STRATEGIC CAPACITY

Given assumptions about the immediate future, identify:

- **Best Bet strategies on which to coalesce in a united manner**
- **Critical areas where strategic capacity will be needed**
- **What specific capacities must be built**
- **Actions needed to build the new capacities**



Focus Area #2: BUILDING STRATEGIC CAPACITY

THREE BEST-BET STRATEGIES

- #1 Reinforce State-Level Capacity to
Protect the Safety Net**
- #2 Embrace Value-Based Care Strategies**
- #3 Invest in Primary Care as the Backbone**



Focus Area #2: BUILDING STRATEGIC CAPACITY

Reinforce State-Level Capacity to Protect the Safety Net

Protect the mission and the program through bi-partisan, state-by-state action. Policy, education, communications and partner relationships.



Focus Area #2: BUILDING STRATEGIC CAPACITY

Embrace Value-Based Care Strategies

Health centers prepare for and lead towards better care for less cost. Includes work on social determinants of health, population health outcomes, and the data to show results.



Focus Area #2: BUILDING STRATEGIC CAPACITY

Invest in Primary Care as the Backbone

With primary care as the center point, we can pursue consolidations, coalitions and new revenue streams to advance the mission of integrated care.



Focus Area #2: BUILDING STRATEGIC CAPACITY

TAKE AWAY MESSAGES FROM THE “SPARK” PRESENTERS

- **“Warriors on Medicaid” – communications, relationships/coalitions**
- **“Masters of Alternate Payment Models”**
- **Social Determinants (or Drivers) of Health**
- **Limited dollars for health care forcing payers to shift to value, outcomes, quality**



Focus Area #2: BUILDING STRATEGIC CAPACITY

TAKE AWAY MESSAGES FROM THE “SPARK” PRESENTERS

- **Payers looking to eliminate unnecessary spending – avoidable ER visits, inadequate perinatal care, avoidable hospital readmissions, etc.**
- **Think about things differently, aka new paradigm requiring new alliances**
- **Must be able to convince policymakers, business leaders, and our communities that health centers have value and offer solutions**



Focus Area #2: BUILDING STRATEGIC CAPACITY

BREAKOUT DIALOGUE

Charge - Work on the following questions:

- 1. What are our strategic Best Bets?**
- 2. What are the organizational capacities needed?**
- 3. How do we build the capacities we need?**



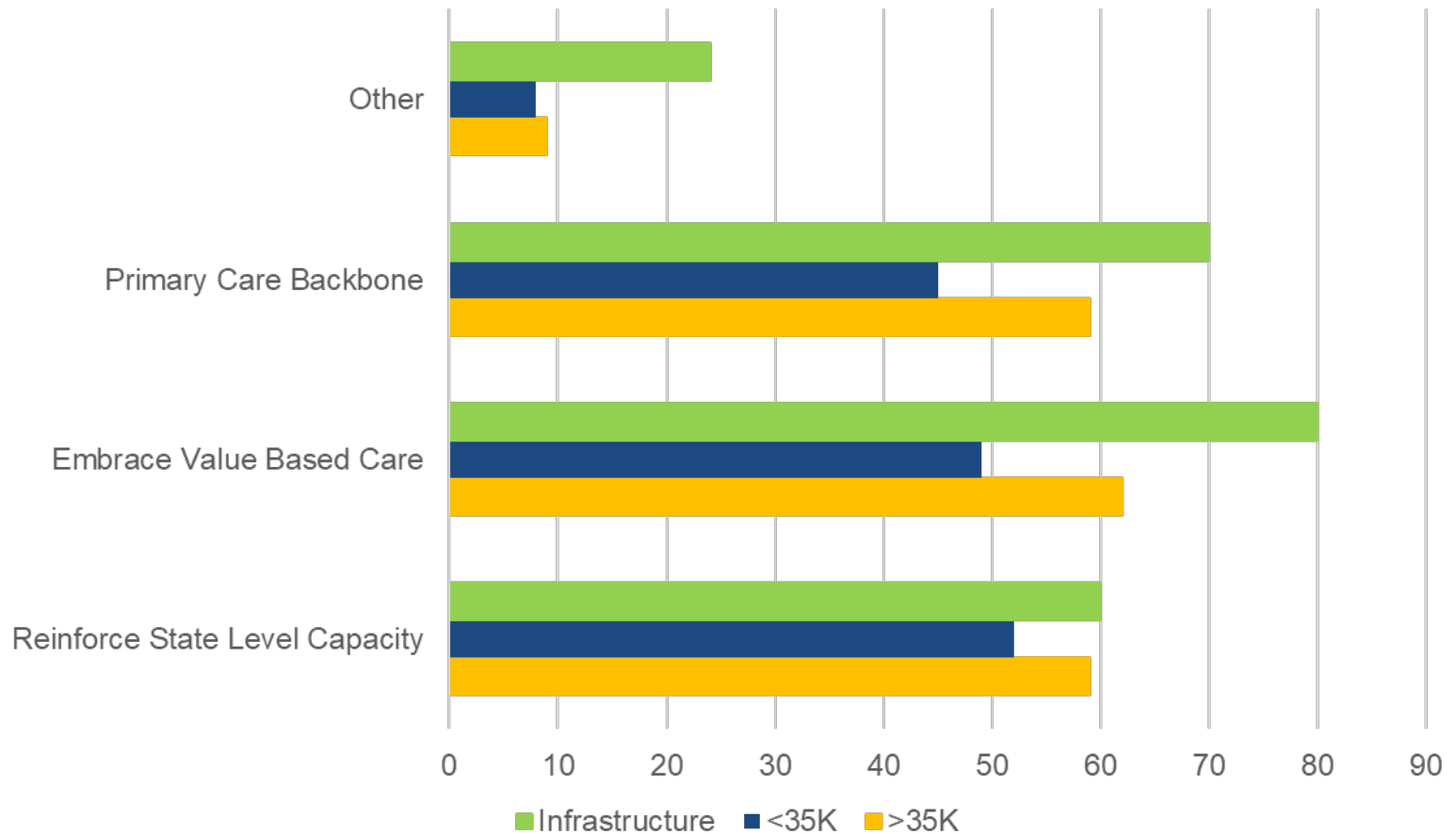
Focus Area #2: BUILDING STRATEGIC CAPACITY

BREAKOUT GROUP DESIGN

- **Infrastructure Organizations (PCAs, HCCNs, NCAs)**
- **FQHCs serving > 35,000 Patients**
- **FQHCs serving < 35,000 Patients**

Focus Area #2: BUILDING STRATEGIC CAPACITY DISCUSSION HIGHLIGHTS

What Are Our Strategic Best Bets? (%)



“**Other**” = Pursue strategic branding/communication; Promote community health and development; Pursue partnerships, including the business community.

Focus Area #2: BUILDING STRATEGIC CAPACITY DISCUSSION HIGHLIGHTS

What is the Level of Support for the Strategic Best Bets?

- 80% responded “Highly Willing to Work” on Best Bets
- 98% responded “Important/Critically Important” to align on national strategy
- Words that capture the potential impact of the Best Bets across all groups:





Focus Area #2: BUILDING STRATEGIC CAPACITY DISCUSSION HIGHLIGHTS

What are the Organizational Capacities Needed in order to Advance our Best Bet Strategies?

HIGHEST PRIORITY CAPACITIES

Data Infrastructure: Collection, Analysis, Sharing

Communications and Branding

Leadership and Advocacy

Unified Vision and Alignment

Business Acumen

Consistent Quality and Baseline Performance Standards



Focus Area #2: BUILDING STRATEGIC CAPACITY DISCUSSION HIGHLIGHTS

How do we Build the Capacities we Need?

CRITICAL FACTORS FOR SUCCESS

National Leadership

Commitment to and Consensus on Action

Funding

State Level and Health Center Buy-In

Partnership and Alignment between local, state, national



Focus Area #2: BUILDING STRATEGIC CAPACITY DISCUSSION HIGHLIGHTS

ACTIONS NEEDED TO BUILD CAPACITIES

Leadership

- Develop leadership core competencies
- Engage in a more collaborative and open dialogue that reflects the current, evolving CHC
- Cultivate new leaders
- Build capacity in national organization to embrace change

Communication

- Develop a professional communication resource that produces a consistent message about who we are
- Embrace branding nationally



Focus Area #2: BUILDING STRATEGIC CAPACITY DISCUSSION HIGHLIGHTS

ACTIONS NEEDED TO BUILD CAPACITIES

Data Analytics

- Build data analytics capacity
- Share information

Build Strategic Coalitions

Build Statewide Advocacy Capacity



**Focus Area #3 CHARGE:
MESSAGING AND VISIBILITY**

Identify ways to strengthen the Health Center message and tactics for adjusting it to be relevant for different local/state/national audiences.



Focus Area #3: MESSAGING AND VISIBILITY

TAKE AWAY MESSAGES FROM THE “SPARK” PRESENTERS

- Use Mission to leverage support; **HOWEVER**, that’s not enough – message must include data that demonstrates Value and why health centers are the best strategic partners
- Touch **ALL** the bases and continue to touch them
 - Elected officials
 - State and local officials
 - Community groups
 - MCOs



Focus Area #3: MESSAGING AND VISIBILITY

TAKE AWAY MESSAGES FROM THE “SPARK” PRESENTERS

- Move from groups needing to pay health centers, to wanting to pay health centers
- Always document results to show impact
- Let us help you solve your problems
- Go beyond traditional funding streams to find investors
- Bring parties together to carry the health center water within state legislatures



Focus Area #3: MESSAGING AND VISIBILITY

PARTICIPANT RESPONSE TO STRENGTHENING OUR MESSAGE

Participants focused on four questions from the perspective of “Red States” and “Blue States”:

Going forward in the next 12-18 months:

- 1. Who will be the top 3 most important audiences in your state environment and your local environment to whom health centers must deliver their value message and why?**
- 2. What core (national) messages will (or will no longer be) effective/relevant for health centers in your state or your city or county? What should be strengthened or changed?**



Focus Area #3: MESSAGING AND VISIBILITY

PARTICIPANT RESPONSE TO STRENGTHENING OUR MESSAGE

- 3. What will be the most important and relevant factors in delivering messages regarding the value of health centers in your state environment and local environment?**
- 4. What resources, information, data, etc. will you need to deliver an effective message?**



Focus Area #3: MESSAGING AND VISIBILITY

RESULTS OF THE BREAKOUT GROUP DISCUSSIONS

- **Considerable overlap of the responses from the “Red” and the “Blue” States**
- **Continue to develop “templates” that allow PCAs and health centers to enter their own data and tailor their messages**
- **Branding – define and gain consensus on what this means for health centers**



Focus Area #3: MESSAGING AND VISIBILITY

RESULTS OF THE BREAKOUT GROUP DISCUSSIONS

1. Who will be the 3 most important audiences in your state environment and your local environment to whom health centers must deliver their value message and why?
 - Patients
 - Payers
 - Community-at-large
 - Businesses



Focus Area #3: MESSAGING AND VISIBILITY

RESULTS OF THE BREAKOUT GROUP DISCUSSIONS

2. What core (national) messages will (or will no longer be) effective/relevant for health centers in your state or your city or county? What should be strengthened or changed?
 - Provider of choice
 - Population health management
 - Save Medicaid \$\$\$
 - Help people get and keep jobs
 - Economic engine



Focus Area #3: MESSAGING AND VISIBILITY

RESULTS OF THE BREAKOUT GROUP DISCUSSIONS

3. What will be the most important and relevant factors in delivering messages regarding the value of health centers in your state environment and local environment?
 - State Budget situation
 - Access to timely and comprehensive data
 - Accurate clinical data that show we “walk the talk”
 - (Need for consolidation?)

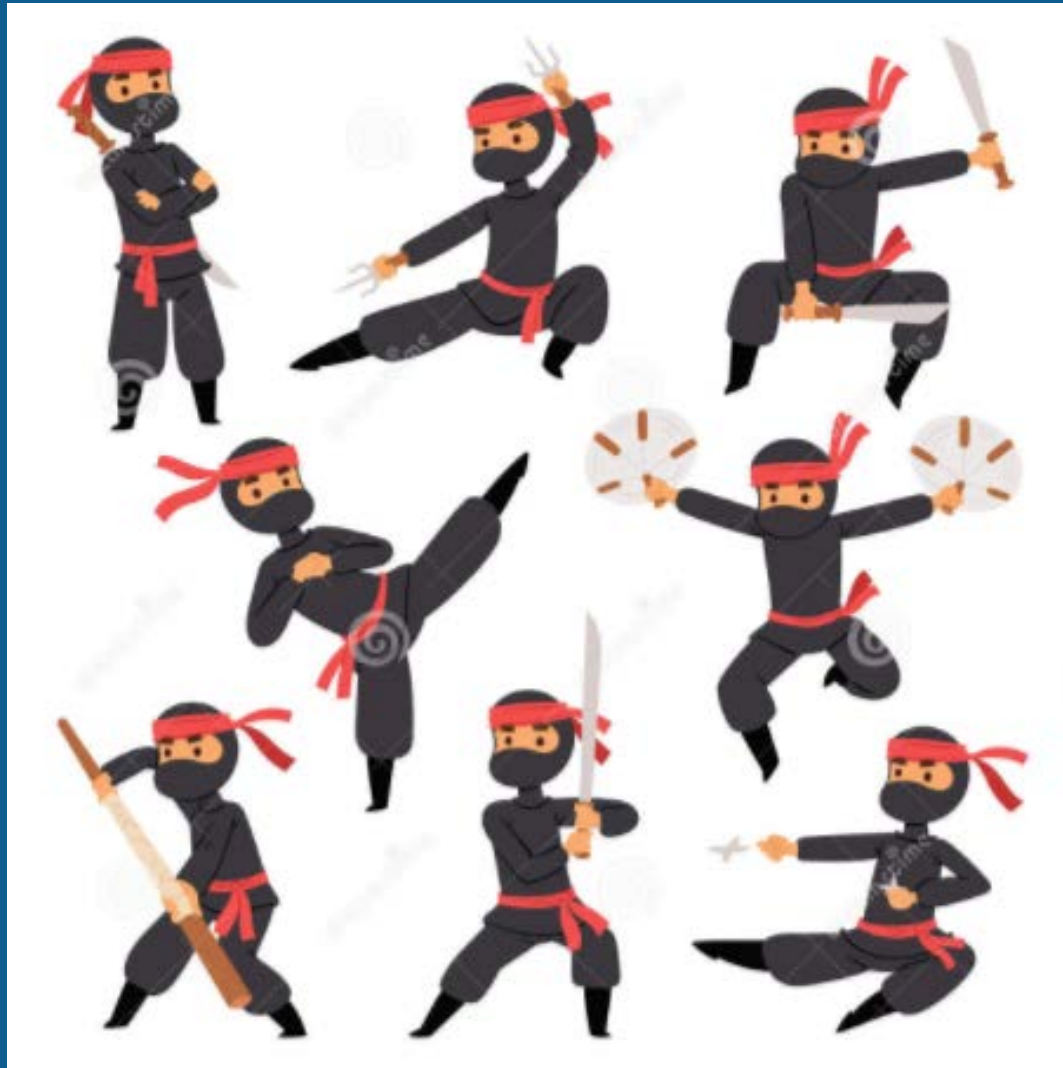


Focus Area #3: MESSAGING AND VISIBILITY

RESULTS OF THE BREAKOUT GROUP DISCUSSIONS

4. **What resources, information, data, etc. will you need to deliver an effective message?**
 - **Calculate impact on employment**
 - **Increase ability of consumers to interact with elected officials**
 - **Timely, accurate local data**
 - **Fact Sheet template**
 - **New Tagline; “Health Centers Embrace Change...”**
 - **(Relationship with National Center for Community Health Research” -- ?)**

Continue to LEAD!





Thank you, Participants, Staff,
and especially our
Group Leaders!

SAFE TRAVELS!!!